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Bib Data Sheet

CONFIRMATION NO. 7707

<b>SERIAL NUMBER</b> 10/783,113	<b>FILING OR 371(c) DATE</b> 02/20/2004 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> SC&C-101US
<b>APPLICANTS</b> Alon Shalev, Ra'anana, ISRAEL; Amir Natan, Tel Aviv, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/258,714 01/22/2003 which is a 371 of PCT/IL01/00402 05/07/2001 which claims benefit of 60/203,172 05/08/2000 This application 10/783,113 claims benefit of 60/506,165 09/26/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/13/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 26	<b>TOTAL CLAIMS</b> 333
<b>INDEPENDENT CLAIMS</b> 35				
<b>ADDRESS</b> 23122				
<b>TITLE</b> Stimulation for acute conditions				
<b>FILING FEE RECEIVED</b> 4643	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	